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XILINX, INC
ATTN: LEGAL DEPARTMENT
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Julie Matthews

(Depositor's name)

October 6, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/606,610	06/26/2003	Frank C. Wirtz II	X-1125 US	4919

TITLE OF INVENTION: EMBEDDED FUNCTION UNITS WITH DECODING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/02/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHO, JAMES HYONCHOL	2819	326-041000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Scott R. Brown

2 LeRoy D. Maunu

3 Justin Liu

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

XILINX, INC., 2100 Logic Drive, San Jose, CA 95124

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 24-0040 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date October 6, 2005

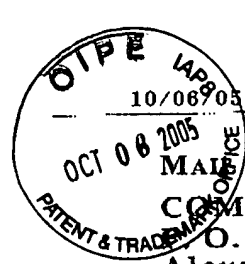
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Justin Liu

Registration No. 51,959

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P.O. Box 1450
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Inventor(s): Frank C. Wirtz II et al.

Assignee: **XILINX, INC.**

Serial No.: 10/606,610

conf.no. 4919

Filed: June 26, 2003

Title: **EMBEDDED FUNCTION UNITS WITH DECODING**

Docket No.: **X-1125 US**

Enclosed: Return Receipt Postcard

Part B. - Fee Transmittal Form

Date: October 6, 2005

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